

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0408881

Insp Area: 4

Thos Bros:

Sub-Type: NSFR

Housing (Y/N): N

Site Address: 2975 MUTTONBIRD WY SAC

Parcel No: 225-1880-044

PARKVIEW UNIT 4B LOT 3

CONTRACTOR

KIMBALL HILL HOMES
10535 EAST STOCKTON BL. STE. K
ELK GROVE CA. 95624

OWNER

ARCHITECT

Nature of Work: MP 2202 1 STORY 9 ROOM SFR

CONSTRUCTION LENDING AGENCY : I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____ Lender's Address _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class B License Number 701803 Date 6/9/04 Contractor Signature L Kas

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

____ I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

____ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts with a contractor(s) licensed pursuant to the Contractors License Law).

____ I am exempt under Sec. _____ B & PC for this reason: _____
Date _____ Owner Signature _____

PAID
CITY OF SACRAMENTO
JUN 09 2004
NORTH PERMIT

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 6/9/04 Applicant/Agent Signature L Kas

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

____ I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

ASL I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

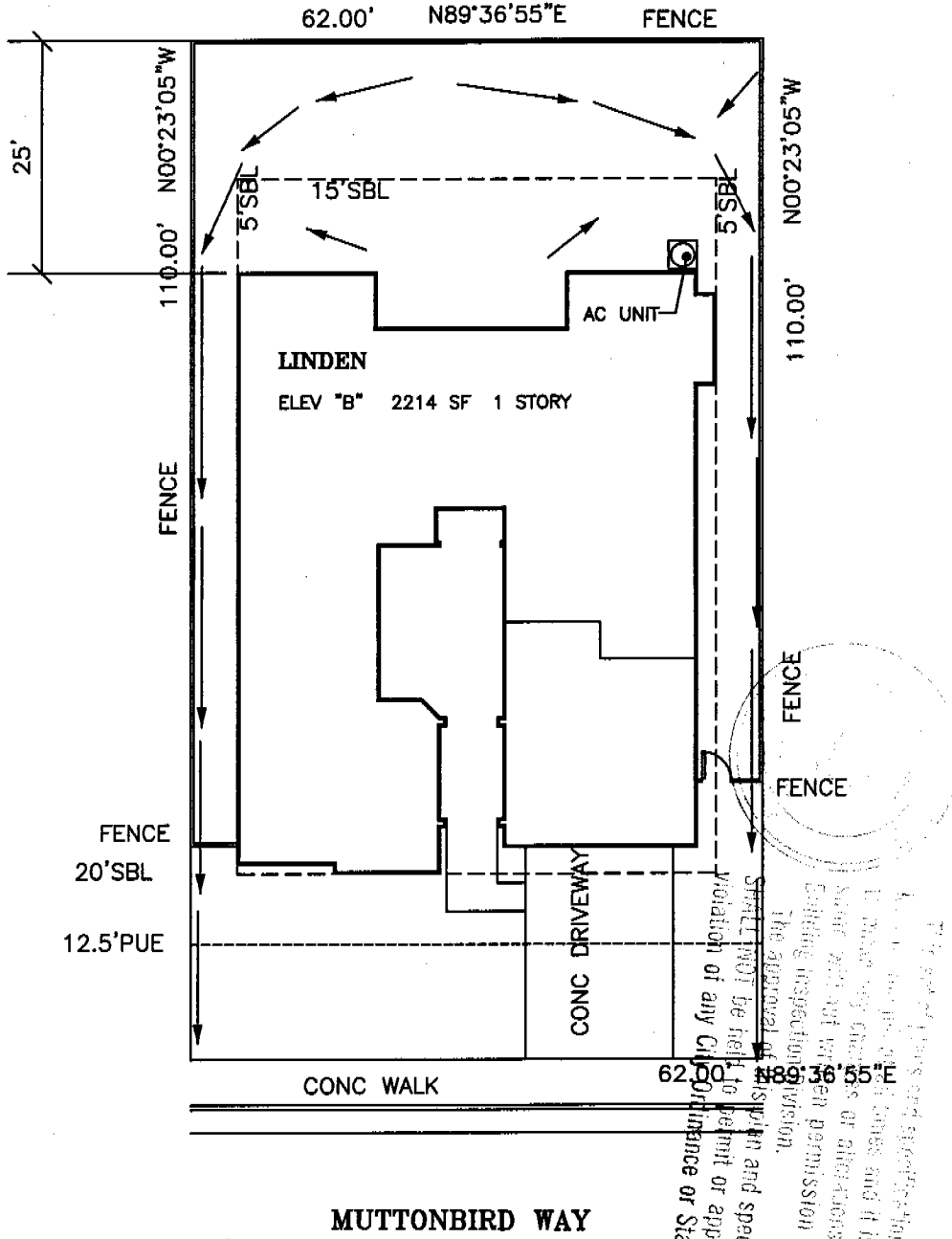
Carrier TRAVELERS Policy Number WC59663000527 Exp Date 10/01/2004

____ (This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 6/9/04 Applicant Signature L Kas

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

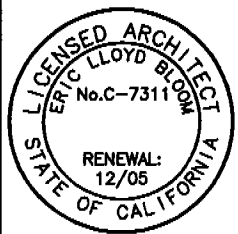


Lot 26 6820



BLOOM
Architectural
Developments
Incorporated
 4437 Kenneth Avenue
 Fair Oaks, CA 95628
 (916)961-1553
 (916)967-3011 Fax

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Plot Plan Disclosure This plot plan approximates a general representation of lot dimensions, easements, fence and home placement, etc. This illustration is not a condition of Kimball Hill Homes sales agreement. The actual placement and measurements demonstrated on this diagram are subject to change without notice.

Signature _____
KHH California, Inc. (916)714-1153
 10535 E. Stockton Blvd. Ste. K, Elk Grove, CA 95624

Job# 3064 26 **Plan#** 2202
Date May 07 04 **Draft** 1
Plan LINDEN **Elev** B
Project Parkview **Unit** 4B
Lot 3B (26)
Address 2975 Muttonbird Way
City Sacramento County CA
APN

PLOT PLAN
 Scale 1"=20'

The approval of this plan and specifications must be obtained from the City of Sacramento and it is the responsibility of the applicant to obtain all necessary permits and approvals from the City of Sacramento before construction begins. The applicant shall be held to be in violation of any City Ordinance or State Law.



**F. RODGERS INSULATION
RESIDENTIAL, INC.**

Thermal Insulation Contractors
Residential

INSULATION
CERTIFICATE

6909

7775 LAS POSITAS ROAD • LIVERMORE, CA 94550
(925) 294-9400 • FAX (925) 294-9475

1300 S. RIVER RD. #125 • W. SACRAMENTO, CA 95691
(916) 386-9400 • FAX (916) 386-9446

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATION, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

R+H LOT # 426 TRACT # EXECUTIVE

STREET _____ CITY _____

EXTERIOR WALLS:

MANUFACTURER O/C THICKNESS/TYPE _____ R-VALUE 13

CEILING:

BATTS: MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE 30

BLOWN IN: MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE 30

MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

FLOORS & OVERHANGS:

SQUARE FOOTAGE COVERED 2435 NUMBER OF BAGS USED _____ R-VALUE _____

MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

OTHER:

MANUFACTURER _____ THICKNESS/TYPE _____ R-VALUE _____

GENERAL CONTRACTOR

CALIFORNIA CONTRACTORS LICENSE # _____

DATE _____

SIGNATURE _____ TITLE _____

INSULATION CONTRACTOR F. RODGERS INSULATION RESIDENTIAL
CALIFORNIA CONTRACTORS LICENSE #771285

DATE 9-29-04

SIGNATURE _____ TITLE _____

INSTALLATION CERTIFICATE

(page 2 of 4)

CF-6R

LOT : 426
 Plan : 2202B;2202REV;;;

Work Order : 156572
 Builder : KIMBALL HILL HOMES - PARKVIEW EXECUTIVE

Site Address :

Permit #

FENESTRATION/GLAZING:

| Manufacturer/Brand Name (GROUP LIKE PRODUCTS) | Operator Type (e.g., fixed, slider) | Manufactured Products | Site Built Products | | Quantity (optional) | Total Square Feet | Comments/ Special Features |
|--|-------------------------------------|---|---------------------|------------------------------|---------------------|-------------------|-------------------------------|
| | | Labelled U-value (< CF-1R value) ² | % of Panes | Default U-Value ² | | | |
| 1. WINDFORD WINDOW | H/Slider | 0.350 | | | | 277.0 | |
| 2. WINDFORD WINDOW | Fixed | 0.330 | | | | 80.0 | |
| 3. WINDFORD WINDOW | S/Naag | 0.350 | | | | 82.0 | |
| 4. * Weighted Average | -----> | 0.346 | ---- | ---- | ---- | 439.0 | ----- |
| 5. | | | | | | | |
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| 24. | | | | | | | |
| 25. | | | | | | | |

²Installed U-value must be less than or equal to value from CF-1R. Alternatively, installed weighted average U-value for the total fenestration area is less than or equal to value from CF-1R.

I, the undersigned, verify that the fenestration/glazing listed above my signature (1) is the actual fenestration product installed; (2) is the equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the product meets or exceeds the appropriate requirements for manufactured devices (from Part 6), where applicable.

Item #s
(if applicable)

Signature, Date

Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

Item #s
(if applicable)

Signature, Date

Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

Item #s
(if applicable)

Signature, Date

Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

* Product mix and u-values reflect plan changes as of 10/05/04

INSTALLATION CERTIFICATE

(Page 1 of 7)

CF-6R

Plan 2202
 Site Address Parview Executive

Permit Number

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

| Equip. Type (pkg. heat pump) | CEC Certified Mfr Name and Model Number | # of Identical Systems | Efficiency (AFUE, etc.) ¹ [≥CF-1R value] | Duct Location (attic, etc.) | Duct or Piping R-value | Heating Load (Btu/hr) | Heating Capacity (Btu/hr) |
|------------------------------|---|------------------------|---|-----------------------------|------------------------|-----------------------|---------------------------|
| <u>FAD</u> | <u>585TX090-16</u> | <u>1</u> | <u>80%</u> | <u>Attic</u> | <u>4.2</u> | | <u>84,000</u> |

Cooling Equipment

| Equip. Type (pkg. heat pump) | CEC Certified Compressor Unit Mfr Name and Model Number | # of Identical Systems | Efficiency (SEER, etc.) ¹ [≥CF-1R value] | Duct Location (attic, etc.) | Duct R-value | Cooling Load (Btu/hr) | Cooling Capacity (Btu/hr) |
|------------------------------|---|------------------------|---|-----------------------------|--------------|-----------------------|---------------------------|
| <u>A/C</u> | <u>38CR048</u> | <u>1</u> | <u>10.0</u> | <u>Attic</u> | <u>4.2</u> | | <u>48,000</u> |

1. ≥ reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) is the actual equipment installed, 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the *Energy Efficiency Standards* for residential buildings, and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the *Appliance Efficiency Regulations* or Part 6), where applicable.

Betty Martino
 Signature, Date 4-5-04

Riv Design, Inc.
 Installing Subcontractor (Co. Name)
 OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

| Heater Type | CEC Certified Mfr Name & Model Number | Distribution Type (Std. Point-of-Use) | If Recirculation Control Type | # of Identical Systems | Rated ² Input (kW or Btu/hr) | Tank Volume (gallons) | Efficiency ² (EF, RE) | Standby ² Loss (%) | External Insulation R-value ² |
|-------------|---------------------------------------|---------------------------------------|-------------------------------|------------------------|---|-----------------------|----------------------------------|-------------------------------|--|
| <u>gas</u> | <u>AOSmith</u> | <u>Residential</u> | <u>N/D</u> | <u>None</u> | <u>4000</u> | <u>50</u> | <u>.62</u> | | <u>R-6</u> |

- 2. For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.
- 3. R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.53.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 111.

I, the undersigned, verify that equipment listed above my signature is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the *Energy Efficiency Standards* for residential buildings; and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the *Appliance Efficiency Regulations* or Part 6), where applicable.

[Signature] 10-11-04
 Signature, Date

Kimball Hill Homes
 Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 WERS Provider (if applicable)
 Building Owner at Occupancy